

ORDER FOR SUPPLIES OR SERVICES										Page 1 Of 4	
1. Contract/Purch Order/Agreement No. DAAE20-01-D-0058			2. Delivery Order/Call No. 0001		3. Date Of Order/Call (YYYYMMDD) 2001NOV21		4. Requisition/Purch Request No. SEE SCHEDULE			5. Priority DOA5	
6. Issued By TACOM-ROCK ISLAND AMSTA-LC-CAC-B LINDA MAES (309)782-3657 ROCK ISLAND IL 61299-7630 EMAIL: MAESL@RIA.ARMY.MIL				Code W52H09	7. Administered By (If other than 6) DCMA ST PETERSBURG 9549 KOGER BLVD GADSEN BLDG SUITE 200 ST PETERSBURG FL 33702-2455				Code S1109A	8. Delivery FOB <input type="checkbox"/> Destination <input checked="" type="checkbox"/> Other (See Schedule if other)	
9. Contractor • HONEYWELL INC, SENSOR AND GUIDANCE PRODUCTS 13350 US HIGHWAY 19 N CLEARWATER FL 33764-7290 • TYPE BUSINESS: Large Business Performing in U.S.				Code OBFA5	Facility 	10. Deliver To FOB Point By (Date) (YYYYMMDD) SEE SCHEDULE			12. Discount Terms	11. X If Business Is <input type="checkbox"/> Small <input type="checkbox"/> Small Disadvantaged <input type="checkbox"/> Woman-Owned	
13. Mail Invoices To the Address in Block See Block 15											
14. Ship To SEE SCHEDULE				Code 	15. Payment Will Be Made By DFAS COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P O BOX 182264 COLUMBUS OH 43218-2264				Code HQ0338	Mark all Packages and Papers with Identification Numbers in Blocks 1 and 2	
16. Type of Order	Delivery/Call	<input checked="" type="checkbox"/>	This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.								
	Purchase	Reference your <input type="checkbox"/> Oral; <input type="checkbox"/> Written Quotation , Dated _____, furnish the following on terms specified herein.									
		Acceptance. The Contractor Hereby Accepts The Offer Represented By The Numbered Purchase Order As It May Previously Have Been Or Is Now Modified, Subject To All Of The Terms And Conditions Set Forth, And Agrees To Perform The Same.									
Name Of Contractor			Signature			Typed Name And Title			Date Signed (YYYYMMDD)		
<input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:											
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE SEE SCHEDULE											
18. Item No.	19. Schedule Of Supplies/Service SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price				20. Quantity Ordered/ Accepted*	21. Unit	22. Unit Price	23. Amount			
	KIND OF CONTRACT: Service Contracts										
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.					24. United States Of America By: SUZANNE C. YACKLEY /SIGNED/ YACKLEYS@RIA.ARMY.MIL (309)782-1466					25. Total	\$24,200.00
26. Quantity In Column 20 Has Been <input type="checkbox"/> Inspected <input type="checkbox"/> Received <input type="checkbox"/> Accepted And Conforms To Contract Except As Noted _____ Date _____ Signature Of Authorized Govt Representative					27. Ship. No.	28. D.O. Voucher No.	30. Initials		33. Amount Verified Correct For		
36. I certify this account is correct and proper for payment _____ Date _____ Signature And Title Of Certifying Officer					<input type="checkbox"/> Partial <input type="checkbox"/> Final	32. Paid By		34. Check Number			
					<input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final			35. Bill Of Lading No.			
37. Received At		38. Received By		39. Date Received		40. Total Containers	41. S/R Account Number		42. S/R Voucher No.		

CONTINUATION SHEET	Reference No. of Document Being Continued PIIN/SIIN DAAE20-01-D-0058/0001 MOD/AMD	Page 2 of 4
Name of Offeror or Contractor: HONEYWELL INC,		

SUPPLEMENTAL INFORMATION
This Delivery Order 0001 provides funds for the repair of two Bradley A3 INUs to be returned to serviceable condition in accordance with the contract statement of work.

*** END OF NARRATIVE A 001 ***

Name of Offeror or Contractor: HONEYWELL INC,

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT						
	SUPPLIES OR SERVICES AND PRICES/COSTS										
0002	<u>Supplies or Services and Prices/Costs</u>										
0002AA	<u>SERVICES LINE ITEM</u>				\$ 24,200.00						
	NOUN: SVCS PRON FOR INU REPAIR SECURITY CLASS: Unclassified PRON: M124A612M1 PRON AMD: 03 ACRN: AA AMS CD: 060015MM P/N: 12471306 NSN: 6605-01-476-7780 (End of narrative B001) <u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin <u>Deliveries or Performance</u> DLVR SCH PERF COMPL <table><tr><td><u>REL CD</u></td><td><u>QUANTITY</u></td><td><u>DATE</u></td></tr><tr><td>001</td><td>0</td><td>28-FEB-2002</td></tr></table> \$ 24,200.00	<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>	001	0	28-FEB-2002				
<u>REL CD</u>	<u>QUANTITY</u>	<u>DATE</u>									
001	0	28-FEB-2002									

Name of Offeror or Contractor: HONEYWELL INC,

CONTRACT ADMINISTRATION DATA

										JOB				
LINE	PRON/	OBLG								ORDER	ACCOUNTING		OBLIGATED	
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>						<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>		
0002AA	M124A612M1	AA	2	97	X4930AC9G	6D	252G	S11116			W52H09	\$	24,200.00	
060015MM														
											TOTAL	\$	24,200.00	
SERVICE										ACCOUNTING		OBLIGATED		
<u>NAME</u>	<u>TOTAL BY ACRN</u>		<u>ACCOUNTING CLASSIFICATION</u>							<u>STATION</u>	<u>AMOUNT</u>			
Army	AA		97	X4930AC9G	6D	252G	S11116			W52H09	\$	24,200.00		
											TOTAL	\$	24,200.00	